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OMB APPROVAL

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DATE	RECEIVED

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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FORM D

PROCESSED

NAY 2 & 2005

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FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

JUNIFORM LIMITED OFFERING EXEMPTION

Name of Offering Kelusa Fund, LP (The	\ . .	is an amendmen	t and name has ch	anged, and indicate	change.)	
Filing Under (Check bo	x(es) that apply):	[] Rule 504	[] Rule 505	[X] Rule 506	[] Section 4(6) [] ULOE	
Type of Filing:	[X] New Filing	[] A	mendment			
		A BASI	C IDENTIFICATIO	N DATA		15
Enter the information re	equested about the issu	ier				_
Name of Issuer Kelusa Fund, LP	([] check if this	s is an amendmen	t and name has ch	anged, and indicate	ch 05056020	} _
Address of Executive C	offices (Number	er and Street, City	, State, Zip Code)	Telep	hone Number (Including Area Code	;)

101 Park Avenue, , 48th Floor, New York, NY 10178			212-984-2300
	s of Principal Business Operations (Nur rent from Executive Offices) Same As	mber and Street, City, State, Zip Code) Above	Telephone Number (Including Area Code) Same As Above
	escription of Business		
The Iss	suer primarily invests in domestic an	d foreign equity securities.	
Type of	Business Organization corporation	[X] limited partnership, already formed	[] other (please specify):
1.1	business trust	[] limited partnership, to be formed	
Actual of	or Estimated Date of Incorporation or C	rganization: Month/Year	
		03/2005 [X]A	ctual [] Estimated
Jurisdic	ction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbrevia	tion for State:
		CNI for Canada: EN for other foreign jurisdiction	on) DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, it received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [X] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[X] General and/or Managing Partner	. :
Full Name (Last name first, if individual) Kelusa Partners, LLC (the "General Partne	ər"')				44.4.
Business or Residence Address (Numb 101 Park Avenue , 48th Floor New York, NY 10178	per and Street, City, State, Zi	p Code)			
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director	[] General and/or Managing Partner	- 1 - 1
Full Name (Last name first, if individual) McCreary, Robert J.					
Business or Residence Address (Numb c/o Kelusa Partners, LLC, 101 Park Avenu New York, NY 10178	per and Street, City, State, Zi ie, , 48th Floor	p Code)			
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner	,
Full Name (Last name first, if individual)					win erwyl [*]
Business or Residence Address (Numb	per and Street, City, State, Zi	p Code)			. 35,,,33.4.5
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner	(maigner)
Full Name (Last name first, if individual)				í	named and the second
Business or Residence Address (Numl	per and Street, City, State, Zi	p Code)			
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner	
Full Name (Last name first, if individual)					. د. بيد مفرود . د. بيد مفرود
Business or Residence Address (Num	ber and Street, City, State, Zi	p Code)			
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner	Brogares .
Full Name (Last name first, if individual)					
Business or Residence Address (Num	ber and Street, City, State, Z	p Code)			

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	(\$0.00) C.;
2. What is the minimum investment that will be accepted from any individual? (* Subject to waiver by the General Partner of the Issuer.) 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Not applicable. Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer	(9-70) C.;
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Not applicable. Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer	. r - + + + + + + + + + + + + + + + + + +
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	
(Check "All States" or check individual States)	
[] All States AL [] AK [] AZ [] AR [] CA [] CO [] CT [] DE [] DC [] FL [] GA [] HI [] ID [1
IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] MS [] MO [MT [] NE [] NV [] NH [] NJ [] NM [] NY [] NC [] ND [] OH [] OK [] OR [] PA [-
RI[] SC[] SD[] TN[] TX[] UT[] VT[] VA[] WA[] WV[] WI[] WY[] PR[-
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	11.000
Name of Associated Broker or Dealer	1 2 2 2 2
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	
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IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] MS [] MO [į
MT [] NE [] NV [] NH [] NJ [] NM [] NY [] NC [] ND [] OH [] OK [] OR [] PA [RI [] SC [] SD [] TN [] TX [] UT [] VT [] VA [] WA [] WV [] WI [] WY [] PR []
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Name of Associated Broker or Dealer	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	
]
IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] MS [] MO [MT [] NE [] NV [] NH [] NJ [] NM [] NY [] NC [] ND [] OH [] OK [] OR [] PA [RI [] SC [] SD [] TN [] TX [] UT [] VT [] VA [] WA [] WV [] WI [] WY [] PR []]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 💛 💆 Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt \$ 0 \$ 0 0 \$ 0 ☐ Common Preferred Convertible Securities (including warrants): \$ <u>25,300.000</u> Partnership Interests......\$ 1,000,000,000(a) Other (Specify:)......\$ Total\$ Answer also in Appendix, Column 4, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number **Dollar Amount** Investors of Purchases <u>2</u> Accredited Investors 25,300,000 0 Non-accredited Investors 0 Total (for filings under Rule 504 only)..... \$ N/A N/A Answer also in Appendix, Column 3, if filing under ULOE. 9 If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount & Type of Type of offering Security Sold Rule 505 N/A Regulation A N/A \$ Rule 504 N/A \$ Total N/A a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. (X) Transfer Agent's Fees \$ Printing and Engraving Costs X \$ 2.500 Legal Fees..... X \$ 35,000 X \$ 7,500 Accounting Fees..... Engineering Fees..... Ø \$ Sales Commissions (specify finders' fees separately)..... X \$ Other Expenses (identify filing fees)......) X \$ 5,000

Total

50,000

⁽a) Open-ended fund; estimated maximum aggregate offering amount.

C-OFFERING PRICE NUMBER OF INVESTORS EXPENSES AND USE OF PROCEEDS

4. b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

s <u>999,950,000</u>

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes below. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjustment gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

		Payment Officer				
		Directors Affiliate			1	Payments to Others
Salaries and fees	Œ	\$	0	(81	\$	<u>0</u>
Purchase of real estate	X	\$	<u>0</u>	(3)	\$	<u>0</u>
Purchase, rental or leasing and installation of machinery and equipment	XI	\$	<u>0</u>	X	\$	<u>0</u>
Construction or leasing of plant buildings and facilities	120	\$	<u>0</u>	Œ	\$	<u>o</u>
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of						
another issuer pursuant to a merger)	(2)	\$	<u>o</u>	X	\$	Õ
Repayment of indebtedness	図	\$	<u>o</u>	133	\$	<u>o</u>
Working capital	X	\$	<u>0</u>	X	\$	<u>0</u>
Other (specify): Portfolio Investments	E	\$	<u>o</u>	X	\$	999,950,000
Column Totals	(X)	\$	<u>0</u>	X	\$	999,950,000
Total Payments Listed (column totals added)	(2)		\$ 99	9,95	0,00	<u>00</u>

DEFEDERAL SIGNATURES

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) Kelusa Fund, LP	Signature Ref	Date 5/16/05
Name (Print or Type) McCreary, Robert J.	Title of Signer (Print or Type) Managing Member of the General Partne	er

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)